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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: R. Rhodes Attorney Docket No.: 7449.7-1  
Patent No.: 6,880,639  
Issued: April 19, 2005  
Title: DOWNHOLE INJECTION SYSTEM  
Group Art Unit: 3672  
Examiner: Daniel P. STEPHENSON

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**SUBMISSION OF REVOCATION OF POWER OF ATTORNEY AND NEW APPOINTMENT**

Sir:

Submitted herewith is a paper revoking all previous powers and appointing the undersigned firm, signed by an officer of the applicant. As noted in the new power, all communications should be directed to the following address:

**Munsch Hardt Kopf & Harr, P.C.**  
3800 Lincoln Plaza  
500 N. Akard Street  
TEL. (214-855-7500)

**CUSTOMER NO. 23559**

It is requested that the records of the Patent and Trademark Office be amended accordingly. Counsel's docket number for this application is 7449.7-1, and it would be greatly appreciated if the records of the Patent and Trademark Office be corrected to reflect Counsel's docket number on all future communications.

In the event there are any fees due in connection with the filing of this paper, please charge Deposit Account No. 13-4900 of Munsch Hardt Kopf & Harr, P.C.

Respectfully submitted,

By: James L. Baudino  
James L. Baudino  
Registration No. 43,486

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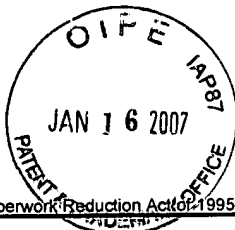
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Date: January 12, 2007Signature: Cindy C. Dioso

Cindy C. Dioso



PTO/SB/82 (01-06)

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**REVOCATION OF POWER OF  
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AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Patent Number	6,880,639
Issue Date	April 19, 2005
First Named Inventor	R. Rhodes
Art Unit	3672
Examiner Name	STEPHENSON, DANIEL P.
Attorney Docket Number	7449.7-1

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

23559

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
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OR

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Individual Name

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature

Name

Date

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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